PTO/SB/17 (10-08)
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Effe	Complete if Known						
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nur	nber 1	10/813,558-C	onf. #4103	
FEE TRANSMITTAL			Filing Date	ling Date March 29, 2004		)4	
For FY 2009			First Named Inv	entor Y	Yoshio Ishii		
FOR FY ZUU9			Examiner Name	L	L. J. Weinstein		
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit	3	3746		
TOTAL AMOUNT OF PAY	Attorney Docket	No.	04110/0201116-US0				
METHOD OF PAYM	ENT (check all the	nat apply)					
Check Credi	it Card M	Ioney Order No	ne Other	please identify	/):		
x Deposit Account	Deposit Account Numb	er: 04-0100	Deposit	Account Name	Darby	& Darby P.	D
For the above-id	entified deposit a	ccount, the Director is	s hereby authorize	ed to: (chec	k all that apply)	)	
x Charge fee	e(s) indicated bel	ow	Charg	e fee(s) ind	icated below, e	xcept for the	filing fee
	y additional fee(s er 37 CFR 1.16 a	or underpayments on 1.17	f x Credit	any overpa	yments		
FEE CALCULATION				-	<del> </del>		
1. BASIC FILING, SEAR		INATION FEES					
			ARCH FEES	EXAMIN	ATION FEES	;	
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)
Utility	330	165 540	270	220	110		<u> 171</u>
Design	220	110 100		140	70		
Plant	220	110 330		170	85	-	
Reissue	330	165 540	270	650	325		
Provisional	220	110 0	0	0	0		
2. EXCESS CLAIM FEE	s				,	<u>S</u> ı	mall Entity
Fee Description						Fee (\$)	Fee (\$)
Each claim over 20 (inc	-					52	26
Each independent claim		g Reissues)				220	110
Multiple dependent clair		<u>.</u>	D 11461			390	195
1 - 20 or HP			ee Paid (\$)		ultiple Depend		
HP = highest number of total	claims paid for, if gr	= eater than 20.		<u>Fee</u>	e (\$)	Fee Paid (\$)	
-	Extra Claims		ee Paid (\$)		<del></del>		•
1 -3 or HP =		=					
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3. APPLICATION SIZE I							
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		application size fee do S.C. 41(a)(1)(G) and		ior smail en	ility) for each a	idditional 30	
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4. OTHER FEE(S)						Fees P	aid (\$)
Non-English Specific				,			
Other (e.g., late filing		01 Request for con				405 555	
		53 Extension for re	sponse within tr	ma month		555	.00
SUBMITTED BY	R		Posistration No.		1		
Signature 2	\ VO 1		Registration No.	44,528	Telephone	(212) 527-	7700

Thomas J. Bean

Name (Print/Type)

October 15, 2009

Date

OTP E 48 5 001 15 2009

AMEN	Docket No. 04110/0201116-US				
Application No.		Filing (		Examiner	Art Unit
10/813,558-Co		March 29	), 2004	L. J. Weinste	in 3746
plicant(s): Yosh	nio Ishii et al.				
vention: VACUU	M CONTROL	SYSTEM			
	тс	THE COMMI	SSIONER FO	OR PATENTS	
ransmitted herev he fee has been					
		CLAIM	S AS AMENI	DED	
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	1	- 20 =		x	
Independent Claims	1	- 3 =		×	
Multiple Depend	ent Claims (ch	eck if applicabl	e)		
Other fee (please	960.00				
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No additional	l fee is require	d for this amer	ndment.		
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H	Deg			Dated:	October 15, 2009
Thomas J. Bear Attorney/Agent		528			
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